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| APPLICATION NO. | FILING DATE | FIRST NAMED INV | | NTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 09/593,645 TITLE OF INVENTION: FO | | | | THOD OF MAKING UBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| APPLN. TYPE | SMALL ENTITY | ISSUE FI | | | \$1400 | 09/14/2006 |
| nonprovisional NO | | \$1400 | | \$0 | 31400 | 03/14/2000 |
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| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (of Change of Correspondence Address form PTO/SB/122) attached. M"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) 343 STATE STREET, ROCHESTER, NY 14650-2201 | | | | | | |
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